

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 19, 2000 8:00 am
Secretary of State

5/5

05-05-2000 90078 026 ****61.25

DOCUMENT # N97000006322

1. Entity Name

FLEMINGTON AREA RECREATIONALA GROUP, INC.

Principal Place of Business

Mailing Address

8341 W. HWY. 318
 REDDICK FL 32688

8341 W. HWY. 318
 REDDICK FL 32688-2673

104322

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SMITH, GEORGE E
 8341 W. HWY. 318
 REDDICK FL 32688

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:

FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
 NAME SMITH, GEORGE E
 STREET ADDRESS 8341 W. HWY. 318
 CITY-ST-ZIP REDDICK FL 32688

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Delete
 NAME GARMON, FREDDIE
 STREET ADDRESS 10021 W. HWY. 318
 CITY-ST-ZIP REDDICK FL 32688

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Delete
 NAME BROWN, KENNETH
 STREET ADDRESS 5350 NW 3RD ST.
 CITY-ST-ZIP Ocala FL 32681

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Delete
 NAME SHEPPARD, MURRVIN
 STREET ADDRESS 10396 NW 193RD
 CITY-ST-ZIP MICANOPY FL 32687

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Delete
 NAME ROBINSON, JACKI
 STREET ADDRESS 8713 NW 181 PLACE
 CITY-ST-ZIP REDDICK FL 32688

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Delete
 NAME RIGGINS, BETTY
 STREET ADDRESS P. O. BOX 276
 CITY-ST-ZIP LOWELL FL 32663

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

George E. Smith
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-00 352-591-1312
 Date Daytime Phone #

CR0207 (9/99)